

EXHIBIT L

INCIDENT

DECLARATION

REPORT

BOOKED

Incident Number 070-438-635 Case 3:07-cr-00388-VRW Document 10-13 Reported Date/Time 04/29/07 18:43 Filed 08/07/2007 Page 2 of 2

Type of Incident

Weapon, Assault, Possession, Manufacture, or Sale -12171, Firearm, Possession By Prohibited Person -12080, Child, Inflicting Physical Pain, Mental Suffering, or Death -15015

Location of Occurrence

1855 Sunnydale Av

At Intersection with/Premise type

Apartment

Confidential Report? ☐Arrest Made? ☒Suspect Known? ☒Suspect Unknown? ☐Non-Suspect Incident? ☐Domestic Violence? ☐

(Type of Weapon Used)

Reporting Unit 3H16D

Location Sent

1855 Sunnydale Av

How Cleared? 6

Reported to Bureau Operations Center

Name Borges

Smr 95

Date/ Time 04/29/07 21:40

Elder Victim ☐Gang Related? ☐Juvenile Subject? ☐Prejudice Based? ☐

070438635

I declare under penalty of perjury, this report of 6 pages is true and correct, based on my personal knowledge, or is based on information and belief following an investigation of the events and parties involved.

PROP 115 CERTIFIED

POST TRAINING

Signature: C. A.

Reporting Officer

Kobold, Robert C.

Star 1592

Station

Ingleside Station

Watch 1600-0700

Date

04/30/07 01:32:35

Reviewing Officer

SGT H. LUSINO 1588

STAR

Station

Ingleside Station

Watch 1600-0700

Date

4/30/07

OIC

SGT C. PEREZ 1204

STAR

Station

Ingleside Station

Watch 2010-06

Date

4/30/07

Related Case

070-433-518

Related Case

Re-Assigned to

Assigned to

5G200

Assigned by

RCK 1592

Copies to

5G200

5G200

5T300

Add'l Copies

DV Unit

Code R 1

Name (Last, First Middle)

SFPD, Rebolli #1651 Kobold #1592

Alias

Day Phone

Type

Refused

Home Address

Refused

City

State

Zip Code

Night Phone

(415) 404-4000

Type

Work

Work Address

Ingleside Station

City

San Francisco

State

CA

Zip Code

94112-

DOB /

Age

DOB

Unk. ☐

or age between:

and

Race

Sex

Height

Weight

Hair Color

Eye Color

ID Type Jurisd.

ID No.

Confidential Person ☐Violent Crime Notification ☐293 PC Notification ☐

Star

Follow-up Form YES ☐Statement YES ☐

Relationship to Subject Stranger/None

School (if Juvenile)

Injury/Treatment

Other Information/If Interpreter Needed Specify Language

Code B 1

Name (Last, First Middle)

Whitfield, Marcus

Alias

Day Phone

Type

Unknown

Home Address

943 Drake Ave

City

Sausalito

State

CA

Zip Code

94965-

Night Phone

Type

Unknown

Work Address

None

City

State

Zip Code

DOB

Unknown ☐

Date of Birth

03/21/85

Age

22

or age between:

and

Race

B

Sex

M

Height

5'11

Weight

170

Hair Color

BLK

Eye Color

BRO

SFNO

613035

J/D# (if Juvi.)

ID Type/Jurisdiction/Number

CII CA 20082280

ID Type/Jurisdiction/Number

FBI US* 607680JB3

ID Type/Jurisdiction/Number

Book Section #1

NW 12318(b)(1)

Book Section #2

NW 12280(a)(1)

Book Section #3

NW 12020(a)(2)

Book Section #4

NW 12021(a)(1)

Book Section #5

273a(b) PC

Booking Location

Ingleside Station

Warrant #

Court #

Action #

Dept

Enroute to

CWB Check

Brown

Star

#703

Warrant Violation(s)

Bail

Mirandized

☒

Star

#219

Date

04/29/07

Time

22:30

Statement

☐

Citation #

Violation(s)

Appear Date/Time

Location of Appearance

Book/Cite Approval

SGT SAINTEZ 11207

Star

Mass Arrest Code

M X-Rays

☐

School (if Juvenile)

☐ CA Form Booked Copy Attached

Other Information: Citation/Warrant/Booking Charges/Missing Person-Subject Description; Scars, Marks, Tattoos

LSW: Red Jacket, white t-shirt, black jeans, black shoes

MW0019